

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND														
1 Date of Request: <u>7-21-03</u>		2 Serial/Patent # <u>09/965,651</u>												
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT										
<input type="checkbox"/>	Filing			\$										
<input type="checkbox"/>	Amendment			\$										
<input type="checkbox"/>	Extension of Time			\$										
<input type="checkbox"/>	Notice of Appeal/Appeal			\$										
<input checked="" type="checkbox"/>	Petition	<u>5</u>	<u>7/1/03</u>	<u>\$ 1090<sup>00</sup></u>										
<input type="checkbox"/>	Issue			\$										
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$										
<input type="checkbox"/>	Maintenance			\$										
<input type="checkbox"/>	Assignment			\$										
<input type="checkbox"/>	Other			\$										
<u>William C. Fuess</u> <u>17258 Amarillo Rd.</u> <u>Ramona, CA 92065</u>		7 TOTAL AMOUNT OF REFUND		<u>\$ 1090<sup>00</sup></u>										
		8 TO BE REFUNDED BY:												
10 REASON:		<input checked="" type="checkbox"/> Treasury Check <u>Credit</u> <input type="checkbox"/> Credit Deposit A/C #: <u>Chit</u>												
<input type="checkbox"/>	Overpayment	9 <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>												
<input checked="" type="checkbox"/>	Duplicate Payment													
No Fee Due (Explanation):														
11 REFUND REQUESTED BY:														
TYPED/PRINTED NAME: <u>Wan Layman</u>		TITLE: <u>pet Exam</u>												
SIGNATURE: <u>Wan Layman</u>		PHONE: _____												
OFFICE: _____														
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****														
APPROVED: <u>[Signature]</u>		DATE: <u>7/22/03</u>												

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance  
Refund Branch  
Crystal Park One, Room 802B**